G.L. Brit. Colonial Office G-3 (1948) 1950 MMI Aden
Hadhramaut MM2

241 the management of irrigation farming on some 5,000 acres. The value
242 of the Board's quarter-share of the net crop obtained, after paying harvesting and threshing expenses in kind, was estimated at over Rs. 1,25,000.

Farming in Abyan, largely influenced by the Board's operations, proved important to the economy of the Western Aden Protectorate. In the production of millet alone, it is estimated that a 30,000 bag crop, equal to 3,000 metric tons, was raised. A large portion of this was held as a reserve, or had been marketed to the easterly districts at the end of the year. General control on the export of this grain to Aden itself was maintained, and the flow of the crop to the districts to the east was encouraged.

The Wadi Hadhramaut Rehabilitation Scheme

654 This was wound up by Government at the end of the 1947–48 financial
426 year. Farmers with outstanding loans were given ten years in which to repay, the basis of repayment being at the rate of 2 per cent of the total loan from the spring crop, 3 per cent from the autumn crop, and 5 per cent from the winter crop grown. By the end of the year, it was apparent that this system of deferred repayment was not proving satis-
[452] factory. Moneylenders had again become active, while late planting and reduced acreage were noticeable in many districts. This undoubtedly resulted from lack of foresight on the part of many farmers, who had failed to reserve sufficient seed and fodder and preferred to resort to moneylenders for obtaining their needs on credit.

406 At the end of the year, proposals were on hand for the introduction of numbers of diesel-driven irrigation pumps for use in the Wadi Hadhramaut.

Co-operation

476 The Beihan Farmers' Association, formed in the previous year, progressed in a satisfactory manner, and much useful experience was gained by the officials of the association. A good *saif* season helped the members, but this was followed by an almost complete lack of water in the *kharif*. In spite of these difficulties, the association was able to help its members in their requirements of seed, stock, and cash needed for well equipment and for concentrates for feeding livestock. At the end of the year, the association had acquired some Rs. 12,000 from members' subscriptions and from interest charged on loans.

476 This association cannot be termed a co-operative society in the true
659 sense of the word. It is an association which has the full support of the local Government, and which at present makes use of Government offices and storehouses for its activities. In the present stage of development this is considered to be the most desirable form of association for Beihan.

Western Aden Protectorate

226 The Western Aden Protectorate fisheries are of minor importance
361 compared with those of the Eastern Protectorate. Shuqra, the seat of
439 the Fadhli Sultan, is, however, a fishing port with a considerable export trade in dried fish

8 Gt. Brit., Colonial Office G-3 (1951-52)1954 MM1 Aden
Hadhramaut MM2

ADEN PROTECTORATE

PART IV

Chapter 1: General Review

WESTERN ADEN PROTECTORATE

642 THE years 1951 and 1952 were marked by (a) Government penetration
648 into the Upper Aulaqi Sheikhdom (Maan) at the invitation of the Ruler and the subsequent formation of the United Administration of Maan and Khalifa; (b) the conclusion of two Advisory Treaties with the Upper Aulaqi Sheikh and Audhali Sultan (May and July, 1952)
647 and a joint Advisory and Protectorate Treaty with His Highness the Sultan of Lahej; (c) the formation of the Fadhli—Lower Yafa' Health Board; and (d) the formation of the Lower Aulaqi Regency Council in Ahwar (August, 1952).

Politically the period under review was one of consolidation and development of the administrations of the various States in the Protectorate.

438 The Abyan Board did well in 1951 when it sold 9,890 bales of cotton for £867,088. In 1952 the rains were not so plentiful with the result that only 6,300 bales were sold for £725,810.

648 Relations with the neighbouring Kingdom of the Yemen remained difficult in spite of the Modus Vivendi Agreement concluded with it in London in January, 1951. Interference in affairs well inside the Protectorate boundary was a cause of friction.

EASTERN ADEN PROTECTORATE

622 In the Qu'aiti and Kathiri States the main constitutional advance has been in the setting up of town and village councils to deal with local affairs.

659 Of necessity both Administrations have been preoccupied with measures to combat the threat of food shortage which must always be
654 faced in this region of uncertain rainfall. The States and local author-
653 ities have maintained dumps of grain, which are designed to tide over
245 a period of scarcity before imports can arrive from the coast, and a periodical check is made on resources of motor transport to ensure that distribution of supplies is not held up by failure of camel traffic in an emergency. Positive measures have been taken to increase local food supplies. Funds have been allocated for loans to farmers to purchase pumps to increase areas of cultivation. Schemes for the rebuilding of dams and for flood control have been put into effect. Particular attention has been paid to the rehabilitation of date palms.

A 164 porting, 2,018 and 2,325 cases, respectively, were recorded. Of these, 59 to 63 per cent were diagnosed as syphilis and 31 to 34 per cent as gonorrhea, while chancroid predominated in the remainder. Some indication of the prevalence of syphilis is provided by the results of serologic examinations of blood specimens taken from individuals admitted to tubeculosis wards. In a series of Kahn tests performed on 243 cases in 1950,[7] positive reactions were obtained in 13 per cent. Centers for the treatment of venereal diseases have been established at the Civil Hospital, in Aden township, and at the Keith Falconer Mission Hospital, in Sheikh Othman.

A 164 758

N 164 Syphilis and gonorrhea are reputed to be common in the towns of the Protectorate, but no reliable information is available. A nonvenereal treponemal infection, believed to be bejel by most authorities, has been reported from various localities in southern Arabia. A focus probably exists around Beiham, in Western Aden Protectorate. Cases are observed from time to time in the Colony hospitals among persons from this area, as well as from Yemen.

N 164 516 Diseases of the Eyes. Trachoma and conjunctivitis are major problems, particularly in the Protectorate, where environmental conditions and the unhygienic customs of the people promote the spread of infectious eye diseases. Trachoma is frequent among the schoolchildren in the Colony. In a survey conducted in 1946,[8] the incidence of trachoma was found to be 18.9 per cent among 1,103 boys examined in the government schools. Measures for improved diagnosis and treatment were instituted, with an appreciable decrease in infection. In a similar group of 1,419 boys observed in 1948, evidence of trachoma was detected in 9.8 per cent.

H 164

N 164 659 Less is known of the extent of the disease in the interior. A medical survey in Western Aden Protectorate in 1939-40[20] revealed widespread trachoma infection, with rates varying from 14 per cent in Dhubiyat to

75 per cent in Shuqra. In most localities, the infection rates ranged from 27 to 88 per cent among children under 15 years of age and from zero to 48 per cent in persons over 15 years of age. The Fadhli and the Abdali tribal districts were the most seriously affected regions visited.

Diseases of the Skin. Favus, ringworm and other mycotic skin infections are widely distributed. Madura foot is common in the Protectorate, and cases are seen in the Colony hospitals each year among patients from the interior. Phagedenic ulcers are responsible for considerable disability among laborers in the Colony and in all parts of the Protectorate. Several thousand cases are treated each year in the hospitals and the dispensaries in Aden Colony, where they are usually designated as "Yemen ulcers." The ankle is the most frequent site of infection, and amputation is often necessary in neglected cases.

Scabies and impetigo are prevalent, especially among the children of inland towns and villages who live under congested, insanitary conditions. By contrast, surprisingly few cases of scabies are encountered among the children seen in the schools in Aden township.

Leprosy. Leprosy is endemic in the Protectorate, but no indigenous cases have been reported from the Colony within recent years. The infection is probably not extensive, although foci of the disease are known to exist in the Hadhramaut and in the Lahej, the Dhala' and the Abyen areas in the western protectorate. As lepers are not discriminated against socially, some difficulty is encountered in controlling the movement of infected individuals in the Colony. A small leper hospital is located at Sheikh Othman: it receives patients not only from Aden territory but also from Yemen. Eighteen of the 29 patients in residence in 1939[18] were open nodular or lepromatous cases.

Other Infections. Tetanus is endemic, but reported cases are rare.

p. 249(A)